# IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

IN THE MATTER OF:	CASE NO. 17-01782-ESL
IVELISSE RIVERA PADILLA	CHAPTER 13
Debtor	

# MOTION SUBMITTING AMENDED SCHEDULES (SCHEDULE I & J)

#### TO THE HONORABLE COURT:

Come now Debtor, represented by the undersigned attorneys, and very respectfully avers and prays as follows:

- 1. On March 15, 2017, the debtor filed a case under the provisions of chapter 13 of the Bankruptcy Code.
- 2. On June 15, 2021, the debtor filed a Post confirmation amended plan adjusting the payment plan to his current income. (See docket #57)
  - 3. Debtor(s) herein submits the amendments Chapter 13 schedules:

### AMENDED SCHEDULE I – TO ACTUALIZE DEBTOR'S INCOME

#### **AMENDED SCHEDULE J** – *TO ADJUST EXPENSES*

**WHEREFORE** applicant prays from this Honorable Court to take notice of the aforementioned information and grant any appropriate relief.

**NOTICE:** Within fourteen (14) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

### RESPECTFULLY SUBMITTED.

In San Juan, Puerto Rico, this June 17, 2021.

**CERTIFICATE OF SERVICE:** I hereby certify that on this same date the foregoing motion was filed with the Clerk of the Court using the CM/ECF system, which will send notification of such filing to all CM/ECF participants and further certify that an exact copy will be sent by mail to all creditors and parties in interest in the attached mailing matrix.

EMG Despacho Legal, C.R.L.

Edificio La Electrónica Suite 212, Calle Bori 1608 San Juan, Puerto Rico 00927 Tel: (787) 753-0055 e-mail: lcdomangual@gmail.com

By: <u>/s/Edgardo Mangual González</u> EDGARDO MANGUAL GONZÁLEZ USDC No. 223113

By: /s/José L. Jiménez Quiñones
JOSE L. JIMENEZ QUINONES
USDC No. 203808
e-mail: lcdojosejimenez@gmail.com

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	in this information to		SEI VERA PADILLA										
	otor 2	IVELISSE KI	VERA PADILLA				_						
	ouse, if filing)						_						
Uni	ted States Bankrup	tcy Court for the	DISTRICT OF PUERT	O RICO			_						
		01782-ESL						Chec	k if this is:	•			
(If Kr	nown)								n amende				
_										ent showin as of the fo			napter
	fficial Form							N	/IM / DD/ Y	YYYY			
S	chedule I: `	Your Inco	ome										12/15
	ch a separate sheet t 1: Describe Fill in your emple	et to this form. (	r spouse is not filing wi On the top of any addition	onal page	es, write yo				umber (if	known). A	Answer	every q	
	information.			Debtor						2 or non-fi	ling sp	ouse	
	If you have more than one job, attach a separate page with information about additional Employment status*		<ul><li>■ Employed</li><li>□ Not employed</li></ul>					☐ Employed ☐ Not employed					
	employers.  Include part-time,		Occupation	PROF.	. SERVICE RNEY	S AS							
	self-employed wo	rk.	Employer's name	LAW A	AFFAIRS F	esc							
	Occupation may it or homemaker, if		Employer's address	AVE. PINO H-23 VILLA TURABO CAGUAS, PR 00725									
			How long employed th	nere?	2 MONT *See Atta		for A	ddition	nal Emplo	yment Inf	ormatic	on	
Par	d 2: Give Det	tails About Mon	thly Income										
	mate monthly incouse unless you are s		ate you file this form. If $y$	ou have	nothing to re	eport for a	any lir	ne, write	e \$0 in the	space. In	clude yo	our non-fi	iling
,	u or your non-filing e space, attach a se	•	re than one employer, co this form.	mbine the	e informatior	n for all e	mploy	ers for	that perso	on on the li	nes bel	ow. If you	u need
								For Del	btor 1		btor 2 c ing spo		
2.			ry, and commissions (be calculate what the monthly			2.	\$_	6	,500.24	\$		N/A	
3.	Estimate and list	monthly overti	me pay.			3.	+\$_		0.00	+\$		N/A	

Official Form 106l Schedule I: Your Income page 1

6,500.24

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	IVELISSE RIVERA PADILLA	_	Case	number (if known)	17-01782	2-ESL	
					Debtor 1	For Deb	tor 2 or	
	Cop	by line 4 here	4.	\$_	6,500.24	\$	N/A	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,653.56	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$_ . \$	0.00	+ \$	N/A N/A	_
_			_	· —		· · · · · · · · · · · · · · · · · · ·		-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,653.56	\$	N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,846.68	\$	N/A	_
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		_				_
	04	settlement, and property settlement.	8c.	\$_ \$	0.00	\$	N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	* *	0.00	\$ \$	N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	N/A	-
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	_
	8h.	Other monthly income. Specify:	8h.+	• \$_	0.00	+ \$	N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		4,846.68 + \$	N	/A = \$	4,846.68
	Add	I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not exify:	depen	•		ted in Sched	dule J. 1. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies				a, if it	2. \$	4,846.68
							Combin	
13.	Do : ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	ı?					y income

Debtor 1 IVELISSE RIVERA PADILLA Case number (if known) 17-01782-ESL

### Official Form B 6l Attachment for Additional Employment Information

Debtor	
Occupation	PROF. SERV. AS A INSURANCE AGENT
Name of Employer	AMBULANT
How long employed	2 years
Address of Employer	

Official Form 106l Schedule I: Your Income page 3

Fill	in this information to identify your case:				
Deb	otor 1 IVELISSE RIVERA PADILLA			k if this is: An amended filing	
	otor 2ouse, if filing)			A supplement show	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF PUERTO RICO		ī	MM / DD / YYYY	
	nown) 17-01782-ESL				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this for mber (if known). Answer every question.				
Par					
1.	Is this a joint case?  ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> and	for Separate House	<i>hold</i> of Debt	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Pes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
		-			□ No
					□ Yes □ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				Li res
Par	t 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a supplibilicable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your expe	enses
(0					
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		900.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00 100.00
5.	Additional mortgage payments for your residence, such as home	ne equity loans	5. \$		0.00

Debtor 1	IVELISSE RIVERA PADILLA	Case number	er (if known)	17-01782-ESL
6. <b>Utili</b>	tios:			
6a.	Electricity, heat, natural gas	6a.	\$	130.00
6b.	Water, sewer, garbage collection	6b.		60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		115.00
6d.	Other. Specify: CELULAR	6d.		100.00
	d and housekeeping supplies		\$	356.68
	dcare and children's education costs		\$	0.00
	hing, laundry, and dry cleaning		·	
		10.	\$	88.00
	sonal care products and services		·	34.00
	ical and dental expenses	11.	<b>—</b>	100.00
	nsportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	200.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	ritable contributions and religious donations	14.		0.00
i. Una	<u> </u>	14.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify:	15d.		0.00
	· · · · <u></u>	13u.	Ψ	0.00
. Taxe Spe	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
	allment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: CAR MAINTENANCE	17c.	\$	35.00
	Other. Specify: CAR REGISTER STICKERS PRORATED	17d.	\$	18.00
	TIRES PRORATED		\$	70.00
	TOLLS		\$	45.00
You	r payments of alimony, maintenance, and support that you did not report as			40.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: You	ır Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	er: Specify: ANIMAL FOOD	21.	*	40.00
	AUTY		+\$	
				100.00
	COUNTANT		+\$	20.00
LUN			+\$	215.00
STA	AMPS		+\$	120.00
. Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	2,946.68
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,040.00
			·	0.040.00
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,946.68
	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,846.68
	Copy your monthly expenses from line 22c above.	23b. ·	-\$	2,946.68
	•	_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
23c.	Subtract your monthly expenses from your monthly income.			4.225.33
	The result is your <i>monthly net income</i> .	23c.	\$	1,900.00
	•	_		
	ou expect an increase or decrease in your expenses within the year after y			
	example, do you expect to finish paying for your car loan within the year or do you expect you	ır mortgage pa	ayment to incre	ase or decrease because of a
_	fication to the terms of your mortgage?			
	lo.			
■ N				

Fill in this information to identify your case:						
Debtor 1	IVELISSE RIVER	A PADILLA				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF PUERTO	RICO			
_	17-01782-ESL					
(if known)						
				į į		

Check if this is an amended filing

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Die	d you pay or agree to pay someone who is NOT an attorney t	o hel	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read the summary tt they are true and correct.  /s/ IVELISSE RIVERA PADILLA IVELISSE RIVERA PADILLA Signature of Debtor 1	and :	Signature of Debtor 2
	Date <b>June 17, 2021</b>		Date

Official Form 106Dec

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### **United States Bankruptcy Court** District of Puerto Rico

In re	IVELISSE RIVERA PADILLA		Case No.	17-01782-ESL
		Debtor(s)	Chapter	13

## AMENDED

AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES							
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR							
I declare under penalty of perjury that I have read the foregoing AMENDED SCHEDULE I & J, consisting of5 page(s), and that they are true and correct to the best of my knowledge, information, and belief.							
June 17, 2021	Signature	/s/ IVELISSE RIVERA PADILLA IVELISSE RIVERA PADILLA Debtor					

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Date

Case:17-01782-EAG13 Doc#:60 Filed:06/21/21 Entered:06/21/21 14:09:17 Desc: Main Label Matrix for local noticing US Bankruptcy Court District of C. of 11 AES LOAN SERVICES

1200 NORTH 7 ST

APARTADO 42007

Mayaguez, PR 00680

AUTORIDAD DE CARRETERAS Y TRANSPORTACION

0104-3 Jose V Toledo Fed Bldg & US Courthouse
Case 17-01782-BKT13 300 Recinto Sur Street, Room 109

Case 17-01782-BKT13 300 Recinto Sur Street, Room 109 HARRISBURG, PA 17102-1419
District of Puerto Rico San Juan, PR 00901-1964

Old San Juan Thu Mar 16 15:59:43 AST 2017

AUTO CASH

PO BOX 368001

AUTO COLLECTION REPOSESSIONS INC
PO BOX 820

SAN JUAN, PR 00936-8800 Moca, PR 00676-0820 San Juan, PR 00940-2007

AUTORIDAD DE ENERGIA ELECTRICA BPPR CARLOS JUAN RALAT AVILES

P.O. BOX 363508 P.O. BOX 362708 CUMBRES DE MIRADERO SAN JUAN, PR 00936-3508 SAN JUAN, PR 00936-2708 593 CALLE 2

COOP A/C AGUADA (p)MOCA COOP Consejo De Titulares COND DANZA DEL SOL

PO BOX 543 PO BOX 1855 20400 JOYUDA APARTADO ADM AGUADA, PR 00602-0543 MOCA PR 00676-1855 CABO ROJO, PR 00623

DEPARTAMENTO DEL TRABAJO

DEPARTMENT OF TREASURY - PT

SPECIAL PROCEDURE UNIT

DOTOP

AUT DE CARRETERAS Y TRANSPORTACION

505 MU OZ RIVERA PISO 12 SAN JUAN, PR 00902-4140 PO BOX 11889 SAN JUAN, PR 00918-3352 SAN JUAN, PR 00902-1889

DTOP Empresas Berrios GILMARIE COLON RALAT

Y OBRAS PUBLICAS PO BOX 674 7313 CALLE RAMON POWER PO BOX 11889 CIDRA, PR 00739-0674 EDIF FULLANA APT 2B

SAN JUAN, PR 00922-1889 Ponce, PR 00717-1505

INTERNAL REVENUE SERVICES IRS JOSE BRITO
2970 MARKET STREET PO BOX 7346 REGENCY PARK APT 18B

MAIL STOP 5 Q-30.133 PHILADELPHIA, PA 19101-7346 Guaynabo, PR 00969 PHILADELPHIA, PA 19104-5002

Liberty Cablevision NATIONAL COLLEGIATE TRUST PEREZ LAW OFFICE
PO BOX 192296 NCO FINANCIAL SYSTEMS, INC. PO BOX 3313

SAN JUAN, PR 00919-2296 PO BOX 4941 MAYAGUEZ, PR 00681-3313

TRENTON, NJ 08650-4941

RELIABLE FIN. SALLIE MAE US DEPARTMENT OF EDUCATION P.O. BOX 21382 LOAN SERVICING CENTER PO BOX 16448

SAN JUAN, PR 00928-1382 PO BOX 9500 Saint Paul, MN 55116-0448
WILKES BARRE, PA 18773-9500

EDGARDO MANGUAL GONZALEZ IVELISSE RIVERA PADILLA JOSE RAMON CARRION MORALES
EMG DEGRACUO LEGAL CIV. 201 AVE REFUGA DINGON DE GAUSTER

DO DOY 0023884

EMG DESPACHO LEGAL, CRL.

381 AVE FELISA RINCON DE GAUTIER

PO BOX 9023884

EDIFICIO LA ELECTRONICA

COND PASEO MONTE, APTO. 802

SAN JUAN, PR 00902-3884

SUITE 201-A, CALLE BORI 1608 SAN JUAN, PR 00902-3884

SAN JUAN, PR 00927-6112

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OCHOA BUILDING 500 TANCA STREET SUITE 301 SAN JUAN, PR 00901

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g)(4).

COOP A/C MOCA End of Label Matrix
PO BOX 1855 Mailable recipients 30
MOCA, PR 00676 Bypassed recipients 0
Total 30